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(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/633,681	08/05/2003	Kciichi Yoshioka	R2184.0247/P247	6878

TITLE OF INVENTION: SEMICONDUCTOR INTEGRATED CIRCUIT DEVICE AND FABRICATION METHOD THEREOF

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional NO		\$1440	\$300	\$0 10/02/2008 AUGNDAF2 00000026 10633681 09/30/2008			
EXAMINER ART UNIT WOJCIECHOWICZ, EDWARD JOSEPH 2815		ART UNIT	CLASS-SUBCLASS	Ø1 FC:1501		1440.00 OP	
		257-758000	02 FC:1594		309.00 OP 3.00 OP		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternative (2) the name of a single registered attorney or a	3 registered patent attorne yely, e firm (having as a member igent) and the names of up meys or agents. If no name	ra <del>X</del>	Shapiro	LLF
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							d for

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON	THE PATENT (print or type)				
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Please check the appropriate assignce category or categories (will not be p	rinted on the patent):				
4a. The following fee(s) are submitted:	b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)				
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Authorized Signature MA	Date				
Typed or printed name Mark J. Thronson	Registration No. 33,082				

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